Standard Form No. 57
Approved April 9, 1942
(Revised July 1942)
U. S. CIVIL SERVICE COMMISSION
C. S. C. Dept. Cir. No. 332

APPLICATION FOR FEDERAL EMPLOYMENT

ANNO. NO.

APP. NO.

INSTRUCTIONS.—Answer every question clearly and completely. Typewrite or write legibly in BLACK INK, to assure clear photographic copies for appointing agencies. ***If you are applying for a specific United States Civil Service Examination,*** read the Examination Announcement carefully, follow all directions, and mail this application to the office named therein; if ***not,*** mail with an explanatory letter to the U. S. CIVIL SERVICE COMMISSION, WASHINGTON, D. C., unless otherwise directed. Notify same office of any change of address.

This space for agency use:

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1. Name of examination, if any; or name of position applied for: AV.

2. Place of examination (if a written test), or place of employment applied for:
(City and State)

3. Optional subject (if mentioned in examination announcement):

This space for U. S. Civil Service Commission

-- Appor.
-- Nonappor.

To U. S. Civil Service Commission

This space for U. S. Civil Service Commission

SEL. NO.

4. X Mr. -- ~~Mrs.~~ -- Miss
PAUL (First name) H. (Middle) KUSUDA (Maiden, if any) (Last)

5. 1900 WEST JACKSON BLVD. (R. D. or street and number)
CHICAGO 12, ILLINOIS (City or post office, and State)

O. S.				
Gr.				
E & E.				
P & D.				
Ini.				

6. Date of birth (month, day, year): OCT. 14, 1922
7. Age last birthday: 20
8. Date of this application: JUNE 19, 1943

-- Preference: Allowed—
-- Veteran.
-- Disability.
-- Wife.
-- Widow.
-- Disallowed.
-- Closed.

Adm'd exam.
Approved by
Exam. date
Not. Ra.
Date Reg.
-- Material att'd.
-- Material filed.
-- Material ret.

9. Legal or voting residence:
State CALIFORNIA

10. Telephone numbers:
SEELEY 9700 — (Residence phone) (Business phone)

11. (a) Check one: X Male. -- Female.
(b) Check one: -- Widowed. X Single. -- Separated. -- Married. -- Divorced.

12. Height, without shoes: 5 ft. 6 in. Weight: 108 lb.

13. Where were you born? LOS ANGELES, CALIFORNIA (Town) (State or country)

-- Indian.

Indicate "Yes" or "No" answer by placing X in proper column	Yes	No
14. Are you a citizen of the United States? Unless otherwise instructed, naturalized citizens must submit, along with this application, Naturalization Certificate; other foreign-born, documentary proof of citizenship. Documents will be returned.	X	
15. Have you ever been arrested, or summoned into court as a defendant, or indicted, or convicted, or fined, or imprisoned, or placed on probation, or has any case against you been filed, or have you ever been ordered to deposit collateral for alleged breach or violation of any law or police regulation or ordinance whatsoever? If so, list all cases, without any exception whatsoever, under Item 45, page 4, giving in each case (1) the date, (2) your age at the time, (3) the place where the alleged offense or violation occurred, (4) the name and location of the court, (5) the nature of the offense or violation, (6) the pendlty, if any, imposed, or other disposition. The above question includes arrests by military or naval authorities and disciplinary action imposed by courts martial, as well as in civil cases. If appointed, your fingerprints will be taken.		X
16. (a) Have you any physical defect or disability whatsoever?		X
(b) Have you ever had a nervous breakdown? If your answer to either (a) or (b) is yes, give full particulars under Item 45, page 4.		X
17. Do you advocate or have you ever advocated, or are you now or have you ever been a member of any organization that advocates the overthrow of the Government of the United States by force or violence? If so, give complete details under Item 45.		X
18. Have you ever been discharged for misconduct or unsatisfactory service, or forced to resign from any position? If so, state (under Item 45) when and where employed and give the name and address of your employer and the reason for your discharge or forced resignation in each case.		X
19. Within the past 12 months, have you used intoxicating beverages? If so, specify: -- Occasionally. -- Habitually. -- To excess.		X
20. Are any members of your family or relatives (either by blood or by marriage), employed by the United States Government, excluding persons in the armed forces? If so, give name, address, relationship, and branch of service of each such relative under Item 45.		X
21. Are you NOW employed by the Federal Government?		X
(a) If so, (Department or agency) (Bureau) (Location)		
(b) If you now are or have ever been so employed, give dates: from (Month) (Year), to (Month) (Year)		

Indicate "Yes" or "No" answer by placing X in proper column	Yes	No
22. (a) Were you ever in the U. S. military or naval service? If so, give branch of service and date of last discharge: -- Army. -- Navy. -- Marine. -- Coast Guard. Date		X
(b) Were all discharges granted under honorable conditions?		
(c) Have you already established military preference with the Civil Service Commission? If so, check kind of preference below: -- Veteran. -- Disabled veteran. -- Wife of disabled veteran. -- Widow of veteran. If you are applying for a specific examination, and wish to claim veteran preference in connection with it, attach C. S. C. (Preference) Form 14, together with the evidence specified therein.		
23. Have you registered under the Selective Service Act? If so, give address and number of local board 134 BISHOP, INYO COUNTY, CALIFORNIA If classified, give your classification IV-C Your order number 13441	X	
24. (a) Are you now a member of any branch of military or naval reserve? If so, give name of organization		X
(b) Are you now on active duty?		
25. Give number of persons completely dependent on you, other than husband or wife NONE		
26. Would you accept short-term appointment? -- 6 months. X 3 months. -- 1 month.	X	
27. (a) Would you accept appointment anywhere offered in the United States? Give location preferences WISCONSIN (MILWAUKEE)		X
(b) Would you accept appointment outside the United States? Give locations acceptable NONE		X
(c) Would you accept appointment in Washington, D. C.? If so, and if you are applying for a specific examination, refer to the examination announcement to see if the Certificate of Residence (C. S. C. Form 12) is to be submitted. Proof of residence is required for many kinds of positions.		X

28. What is the lowest entrance salary you will accept? $ 1440 per YEAR
You will not be considered for positions paying less.

29. If you are willing to travel specify: X Occasionally. -- Frequently. -- Constantly.

30. How much notice will you require to report for work? ONE WEEK

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Print or type your name here as in Item 4 MR. PAUL H. KUSUDA

31. (a) Have you ever **filed** applications for any Federal civil service examinations? (If so, list them below.) X Yes ___ No

Titles of examinations	Examined in what cities	Month and year	Ratings
UNDER INSPECTOR, NAVAL ORDNANCE	LOS ANGELES, CALIFORNIA	FEB., 1942	77

(b) Have you **passed** any State or other civil service examination (other than the above) within the last 5 years? (If so, give details under Item 45) ___ Yes X No

32. EDUCATION: (a) Circle highest grade completed, elementary or high school: 1 2 3 4 5 6 7 8 9 10 11 (12) Did you graduate? X Yes ___ No

Name and location of school	Dates attended From—	Dates attended To—	Years completed Day	Years completed Night	Degrees conferred Title	Degrees conferred Date	Semester hours credit
(b) College or university LOS ANGELES CITY COLLEGE LOS ANGELES, CALIFORNIA	2/40	3/42	2 YEARS		NONE		62
(c) Other NONE					Studies		

(d) List your four chief undergraduate subjects	Semester hrs.	List your four chief graduate subjects	Semester hrs.
MATHEMATICS	14	NONE	
PHYSICS	12		
CHEMISTRY	10		
ENGINEERING	11		

33. Indicate your knowledge of foreign languages.

	READ			SPEAK			UNDERSTAND		
	Exc.	Good	Fair	Exc.	Good	Fair	Exc.	Good	Fair
JAPANESE	MORE					X			X

34. Are you **now** a licensed member of any trade or profession (such as electrician, radio operator, pilot, lawyer, CPA, etc.)? ___ Yes X No

If not, have you ever been licensed? X

Give kind of license and State

Earliest license (year)

Most recent license (year)

35. REFERENCES: List five persons, who are not related to you by blood or marriage, who live in the United States, and who are or have been mainly responsible for close direction of your work, or who are in a position to judge your work critically in those occupations in which you regard yourself as best qualified.

Full name	Address (Give complete address, including street and number)	Business or occupation
MR. O.D. RICHARDSON	947 No. MARIPOSA AVE LOS ANGELES, CALIF	PROFESSOR AT COLLEGE
MR. RICHARD S. McINTIRE	LOS ANGELES CITY COLLEGE LOS ANGELES, CALIF	PROFESSOR AT COLLEGE
MRS. AFTON D. NANCE	2110 MANHATTAN AVE., HERMOSA BEACH, CALIF	TEACHER—PRINCIPAL
DR. GENEVIEVE W. CARTER	GENERAL DELIVERY MANZANAR, CALIF.	SUP'T OF EDUCATION
MISS HELEN ELY	GENERAL DELIVERY MANZANAR, CALIF.	HIGH SCHOOL TEACHER

36. May inquiry be made of your present employer regarding your character, qualifications, etc.? X Yes ___ No

37. EXPERIENCE: In the space furnished below give a record of every employment, both public and private, which you have had since you first began to work. **Start with your present position and work back to the first position you held,** accounting for all periods of unemployment. Describe your field of work and position and, except for employments held less than three months, give your duties and responsibilities in such detail as to make your qualifications clear. Give name you used on pay roll if different from that given on this application.

PRESENT POSITION

Place CHICAGO, ILLINOIS (City) (State)

From JUNE (Month), 19 43 (Year) to ___ (Month), 19 — (Year)

Name of employer: JOHN F. CUNIO PRINTING CO.

Address 465 W. CERMAK RD. CHICAGO, ILLINOIS

Kind of business or organization: PRINTING AND BOOK BINDING

Number and class of employees you supervised NONE

Name and title of your immediate supervisor MISS BONELLI FORELADY

Exact title of your position LABORER

Salary: Starting, $ .50 Per HR Final, $ .62½

Duties and responsibilities

Machines and equipment you used NONE

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DO NOT WRITE IN THIS SPACE

Place MANZANAR (City) CALIFORNIA (State)
From JANUARY (Month) 19 43 (Year) To APRIL (Month) 19 43 (Year)
Name of employer:
ADULT EDUCATION DEPARTMENT
Address WAR RELOCATION AUTHORITY
MANZANAR, CALIFORNIA
Kind of business or organization:
ADULT EDUCATION
Number and class of employees you supervised NONE
Name and title of your immediate supervisor MR. CHARLES K. FERGUSON, DIRECTOR, ADULT EDUCATION
Reason for leaving LEAVING CENTER

Exact title of your position SUPERVISOR OF PLANNING AND PROGRAM DEVELOPMENT Salary: Starting, $ 19— Per MO. Final, $ 19—
Duties and responsibilities RESPONSIBLE FOR SPECIAL EVENTS
MADE PHYSICAL ARRANGEMENTS FOR NEW CLASSES
PUBLICITY FOR CLASSES AND SPECIAL EVENTS
ORGANIZATION OF SCHOLARSHIP FUND
Machines and equipment you used TYPEWRITER

Place MANZANAR (City) CALIFORNIA (State)
From SEPT. (Month) 19 42 (Year) To JAN (Month) 19 43 (Year)
Name of employer:
COMMUNITY SERVICES DIVISION
Address WAR RELOCATION AUTHORITY
MANZANAR, CALIFORNIA
Kind of business or organization:
ADMINISTRATIVE
Number and class of employees you supervised NONE
Name and title of your immediate supervisor MR. THOMAS M. TEMPLE
CHIEF, COMMUNITY SERVICES
Reason for leaving DISTURBANCE IN CENTER

Exact title of your position INTERVIEWER Salary: Starting, $ 16— Per MO Final, $ 16—
Duties and responsibilities ACT AS LIAISON MAN BETWEEN COMMUNITY SERVICES DIVISION AND EDUCATION DEPARTMENT.
MAKE REPORTS OF MEETINGS AND OBSERVATIONS
ASSIST IN OFFICE WORK
ANSWER BUSINESS LETTERS
Machines and equipment you used TYPEWRITER

Place MANZANAR (City) CALIFORNIA (State)
From JUNE (Month) 19 42 (Year) To SEPT. (Month) 19 42 (Year)
Name of employer:
CENSUS RECORDS DEPARTMENT
Address WAR RELOCATION AUTHORITY
MANZANAR, CALIFORNIA
Kind of business or organization:
RECORDS HANDLING
Number and class of employees you supervised FIVE FILE CLERKS AND TWO TYPISTS
Name and title of your immediate supervisor MR. KAY KAGEYAMA
SUPERVISOR
Reason for leaving CALLED BY CHIEF OF COMMUNITY SERVICES

Exact title of your position SENIOR FILE CLERK Salary: Starting, $ 16— Per MO Final, $ 16—
Duties and responsibilities COMPLETE CHARGE OF ALL RECORDS.
3-DIGIT OCCUPATIONAL CODING WORK
SUPERVISED FILE CLERKS AND TYPISTS
FILING WORK
TYPING
ASSIST SUPERVISOR
Machines and equipment you used TYPEWRITER

Place LOS ANGELES (City), CALIFORNIA (State)
From FEB (Month) 19 40 (Year) To APRIL (Month) 19 43 (Year)
Name of employer:
LOS ANGELES CITY COLLEGE
Address 855 NO. VERMONT AVE.
LOS ANGELES, CALIFORNIA
Kind of business or organization:
COLLEGE
Number and class of employees you supervised NONE
Name and title of your immediate supervisor MR. A. J. SCHNETTNER
HEAD, MEN'S GYM DEP'T.
Reason for leaving LEAVING LOS ANGELES UNDER EVACUATION ORDERS

Exact title of your position GENERAL OFFICE CLERK PART TIME Salary: Starting, $ .40 Per HR Final, $ .40
Duties and responsibilities HANDLE ALL OFFICE RECORDS
ANSWER PHONE CALLS
KEEP ATTENDANCE RECORDS
ISSUE GYMNASIUM EQUIPMENT
TYPE RECORD CARDS
ASSIST IN COLLEGE ENROLLMENT
STRAIGHT COPY TYPING WORK
Machines and equipment you used TYPEWRITER

If more space is required, use a Continuation Sheet (Standard Form No. 58) or a sheet of paper, size 8 x 10½ inches. Write on each sheet your name, full address, date of birth, and examination title (if any). Enclose, unattached, with application.

38. Do you hold any position or office under any State, Territory, county, or municipality? ---- No X
If so, give details under Item 45. Yes

39. Do you receive any pension or other benefit (exclusive of Adjusted Service Certificate) for military or naval service, or an annuity from the U. S. Government under any Retirement Act? ---- No X
If so, give details under Item 45. Yes

40. Show name and address of wife's (or husband's) employer (if none, write "None"):

NONE

41. (a) Were any of the following members of your family born outside Continental U. S. A.? X Yes ---- No

--- Wife --- Husband X Father X Mother.

If so, indicate which by marking the appropriate space, and show under Item 45 for each, (1) full name, including maiden name of wife or mother; (2) birthplace; (3) native citizenship; and (4) if U. S. naturalized, date of naturalization.

(b) Have you any relatives, by blood or by marriage (excluding persons in the U. S. armed forces), **now** living in a foreign country? ---- No X Yes

If so, for each relative show under Item 45 the (1) name, (2) relationship (3) place of residence, (4) birthplace, (5) present citizenship, and (6) whether transient or resident.

42. List any special skills not shown in Question 37, such as operation of short-wave radio, multilith, key-punch, turret-lathe, or scientific or professional devices:

SKILL TYPING SKILL ----

SKILL ---- SKILL ----

Words per minute in typing 45; stenography NONE

Do you have a license to operate an automobile? X Yes ---- No

43. State what kind of work you prefer OFFICE CLERK-TYPIST

44. Give any special qualifications not covered elsewhere in your application, such as (a) your more important publications (do NOT submit copies unless requested); (b) your patents or inventions; (c) hobbies, construction of instruments, etc.

LONG HAND NOTE TAKING FOR MEETINGS

45. Space for detailed answers to other questions:

Item No.	Write in left column numbers of items to which detailed answers apply
41 a.	MASAO MR. M. KUSUDA SAGA, JAPAN JAPANESE
	MRS. CHITEKO KOGA KUSUDA SAGA, JAPAN JAPANESE

If more space is required, use a sheet of THIN paper, size 8 x 10½ inches. Write on each sheet your name, full address, date of birth, and examination title (if any). Use one side only. Enclose, unattached, with application.

If you claim preference for the Indian Service as an Indian, you must file with this application a certificate from the superintendent of the Indian agency where you are registered, or from the Commissioner, Bureau of Indian Affairs, showing that you have at least one-fourth Indian blood.

JURAT (OR OATH).—This jurat (or oath) must be executed.

The following oath must be taken before a notary public, the secretary of a United States civil service board of examiners, or other officer authorized to administer oaths, before whom the applicant must appear in person. The following are among those not authorized to administer this oath: Postmasters (except in Alaska), Army officers, post-office inspectors, and chief clerks and assistant chief clerks in the Railway Mail Service.

The composition and work in connection with any material required to be submitted for this examination are entirely my own, except where I have given full credit for quoted matter or the collaboration of others by quotation marks and references, and in the composition of the same I have received no assistance except as indicated fully in my explanatory statement.

I, the undersigned, DO SOLEMNLY SWEAR (OR AFFIRM) that the statements made by me in answer to the foregoing questions are full and true to the best of my knowledge and belief, SO HELP ME GOD.

If female, prefix "Miss" or "Mrs.," and if married use your own given name, as "Mrs. Mary L. Doe."

(Signature of applicant) Paul H. Kusuda
(Sign WITH PEN AND INK your name—one given name, initial or initials, and surname)

Subscribed and duly sworn to before me according to law by the above-named applicant this 19th day of June, 1943, at city [or town] of Chicago, Ill.
county of Cook, and State [or Territory or District] of ----

(Signature of officer) Lloyd A. Olson
(Official title) Notary Public

U. S. GOVERNMENT PRINTING OFFICE O—29094-1